

## NBS ADVISORY COMMITTEE: ADDING TESTS — USE OF CRITERIA

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The following is a draft version of the criteria for use by the Advisory Committee as they assess possible new conditions to the state's NBS program. Note that **Cost-Benefit / Cost-Effectiveness** is segregated out as a last variable. Other variables shown have no real order of importance, but because **Cost-Benefit/ Cost-Effectiveness** requires lengthy economic analysis, this analysis should only be undertaken if the disorder in question has met all other criteria.

<b>CRITERIA: ADDING DISORDERS TO NBS PROGRAM</b>	
May 8, 2002	
<b>PREVENTION POTENTIAL AND MEDICAL RATIONALE</b>	Identification of the condition provides a clear benefit to the newborn: preventing delay in diagnosis, developmental impairment, serious illness, or death.
<b>TREATMENT AVAILABLE</b>	Appropriate and effective screening, diagnosis, treatment, and systems are available for evaluation and care.
<b>PUBLIC HEALTH RATIONALE</b>	Nature of the condition (symptoms are usually absent, such that diagnosis is delayed and treatment effectiveness is compromised) and prevalence of the condition justify population-based screening rather than risk-based screening
<b>AVAILABLE TECHNOLOGY</b>	Sensitive, specific, and timely tests are available that can be adapted to mass screening.
<b>COST-BENEFIT/COST –EFFECTIVENESS</b>	The benefits justify the costs of screening.